

VZCZCXRO2813
OO RUEHCHI RUEHDT RUEHHM
DE RUEHJA #6495/01 1421246
ZNR UUUUU ZZH
O 221246Z MAY 06
FM AMEMBASSY JAKARTA
TO RUEHC/SECSTATE WASHDC IMMEDIATE 4659
RUEHPH/CDC ATLANTA GA IMMEDIATE
INFO RUEAUSA/DEPT OF HHS WASHINGTON DC IMMEDIATE
RUEHZA/ASSOCIATION OF SOUTHEAST ASIAN NATIONS
RUEHRC/USDA FAS WASHDC
RHEHNSC/NSC WASHDC
RHMFIUU/BUMED WASHINGTON DC
RHEFDIA/DIA WASHINGTON DC
RUEKJCS/SECDEF WASHDC
RHHMUNA/CDR USPACOM HONOLULU HI
RUEKJCS/CJCS WASHDC
RUEHBY/AMEMBASSY CANBERRA 9495
RUEHFR/AMEMBASSY PARIS 0863
RUEHRO/AMEMBASSY ROME 1877
RUEHIN/AIT TAIPEI 1804
RUEHHK/AMCONSUL HONG KONG 2138
RUEHBJ/AMEMBASSY BEIJING 3444
RUEHHM/AMCONSUL HO CHI MINH CITY 0072
RUEHGZ/AMCONSUL GUANGZHOU 0230

UNCLAS SECTION 01 OF 03 JAKARTA 006495

SIPDIS

SIPDIS
SENSITIVE

DEPT FOR EAP/IET, A/MED AND S/ES-O
DEPT FOR OES/FO, OES/EID, OES/PCI, OES/STC AND OES/IHA
DEPT PASS TO USDA/FAS/DLP/HWETZEL AND FAS/ICD/LAIDIG
DEPT ALSO PASS TO USDA/FAS/FAA/DYOUNG AND USDA/APHIS
DEPT ALSO PASS TO USAID/ANE/CLEMENTS AND GH/CARROLL
DEPT ALSO PASS TO HHS/BILL STEIGER AND AMAR BHAT
PARIS FOR FAS/AG MINISTER COUNSELOR
CANBERRA FOR APHIS/DHANNAPEL
ROME FOR FAO
NSC FOR JMELINE
BANGKOK FOR RMO, CDC, USAID/RDM/A
USPACOM ALSO PASS TO J07

E.O. 12958: N/A

TAGS: [TBIO](#) [AMED](#) [CASC](#) [EAGR](#) [AMGT](#) [PGOV](#) [ID](#) [KFLU](#)
SUBJECT: INDONESIA: MEDAN AVIAN INFLUENZA CLUSTER UPDATE

REF: A) Jakarta 6150 B) Jakarta 6148

JAKARTA 00006495 001.2 OF 003

¶1. (SBU) Summary: Fatal cases of H5N1 infection have occurred in three separate locations in Indonesia since May 18, 2006. These include a seventh family member associated with the cluster of cases in Northern Sumatra (refs A and B). Another family member identified with infection last week remains hospitalized. Ministry of Health (MOH) investigators have offered no evidence of the source of infection. Centers for Disease Control and Prevention (CDC) influenza specialist Dr. Tim Uyeki departed for Medan May 19 to help the Ministry of Health (MOH) investigate the family cluster. Another likely AI victim emerged in Surabaya last week, the second in as many weeks. This time it was a 26-year old male from Jepara Central Java, who died May 20. Finally, a 39-year old male died at the main Infectious Diseases Hospital in Jakarta. NAMRU-2 and the MOH's laboratory at NIHRD (Litbangkes) diagnosed all three cases. Samples have been shipped to the University of Hong Kong (UHK) and the CDC in Atlanta for confirmation. All told, as of May 22, post reports 50 human AI cases as confirmed or probable, with 38 resulting in fatalities (76 percent). End Summary.

Medan Cluster Update

12. (SBU) Six family members have been confirmed with H5N1 infection in North Sumatra, with another listed as probable following laboratory analysis at NAMRU-2. Counting the index case, H5N1 infection is strongly suspected in eight cases, making this the largest family cluster studied. The eighth victim died 22 May, reportedly after having sought relief from traditional medicine. He was never hospitalized, although had taken Oseltamivir for three days before he died. Afflicted family members had contact with the index case prior to the development of her illness. (Note: This most recent case has been remarkable for the rapid and cooperative investigation and laboratory diagnoses. The specimens were collected in the afternoon of May 21 and flown immediately to Jakarta, where laboratory technicians at NAMRU-2 and MOH-NIHRD worked through the night and provided the GOI with results on the morning of May 22.

13. (SBU) Centers for Disease Control and Prevention (CDC) influenza specialist Dr. Tim Uyeki traveled to Medan May 17 to help Dr. Tom Grein from the World Health Organization (WHO) in Geneva and the Ministry of Health (MOH) with the ongoing investigation of the family cluster. These two epidemiologists are working collaboratively with the district health department to set up surveillance within the village and among contacts with the cases. The team is making progress in investigating the cluster, including interviewing some family members and limited visits to the village over the past week. There is still no evidence of additional cases outside of the family cluster. Family members who have had contact with the latest case are being provided with Oseltamivir. The WHO team, including Dr. Uyeki, will likely stay in the community throughout the

JAKARTA 00006495 002.2 OF 003

week. Unhindered access to the international and MOH team to the area remains a process of negotiation among local villagers within the community.

14. (SBU) The FAO sent a team to North Sumatra on May 16 to investigate H5N1 infections in animals. To date, neither the FAO nor the Ministry of Agriculture (MOA) has found clear evidence of recent infections in swine, chickens or manure in the area, although the index case reportedly lost three chickens before the development of her symptoms and had worked closely with manure from poultry. However, MOA contacts told us May 19 that the MOA found sero-positive chickens, ducks, and pigs in the area. (Note: In February 2006, the MOA laboratory identified H5N1 infection in poultry in the same district as the North Sumatra family cluster. With funding from USAID, FAO will rapidly expand its animal surveillance and control program to North Sumatra).

15. (SBU) The CDC and UHK have sequenced isolated viruses from all five of the initial wave of victims, and the CDC reports that while the sub-lineage of these viruses are unique from other human viruses in Indonesia, they are similar to previously characterized bird viruses from the North Sumatra region. The viruses are purely avian in nature and no significant changes have been identified to suggest greater transmissibility among humans.
Additional Deaths in Java

16. (SBU) Another victim has died in the Surabaya, East Java, the second in as many weeks. According to the daily "Jawa Pos", the 19-year old male from Jepara Central Java died last Saturday, May 20 at Siloam Hospital in Surabaya. The victim was reportedly hospitalized May 9 but died before he could be transferred to Dr. Sutomo Hospital, an AI reference hospital. According to Siloam Hospital officials, the patient was admitted with pneumonia and high fever. As his condition worsened, the medical staff suspected AI infection and took blood samples which they sent to the MOH laboratory

in Jakarta. In addition, a 39-year old male employed in the production of shuttle cocks used in badminton fell ill 19 May and passed away May 21 at the Infectious Diseases Hospital in Jakarta. In both instances, NIHRD and NAMRU-2 identified H5N1 infection in the diagnostic samples. Confirmation is pending at the U.S. CDC and the UHK.

Human AI Case Profile

¶7. (U) The recent activity in the past week has brought the number of confirmed H5N1 cases in humans in Indonesia to 44, with 34 deaths. An additional 6 cases are probable. All told, as of May 22, post reports 50 human AI cases as confirmed or probable, with 38 resulting in fatalities (76 percent).

¶8. (SBU) NAMRU-2 data indicates the following AI-related case profile as of May 22:

-- Number of laboratory confirmed (positive PCR and/or

JAKARTA 00006495 003.2 OF 003

serology) human AI cases: 44, of which 34 have been fatal (fatality rate of 77 percent).

-- Number of probable AI cases: 6, with 4 deaths (fatality rate of 67 percent).

-- Number of cases awaiting verification by the US CDC: 4.

-- Number of possible AI cases under investigation: approximately 18.

-- Number of excluded AI cases: 302.

PASCOE